

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	gh.		7/2/92
O.I.P.E. CLASSIFIER			7/13/100
FORMALITY REVIEW	1/14	5C861	9/10/02
RESPONSE FORMALITY REVIEW		60105	1-7-00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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